

STATE OF HAWAII  
Department of Accounting and General Services  
Division of Public Works  
**MONTHLY ESTIMATE**

FOR THE MONTH OF OCTOBER 2013

Date: November 6, 2013

CONTRACTOR: PER, Inc.

ADDRESS: 378 North School Street, #200

City, State ZIP: Honolulu, HI 96817

Contract No. 61503 ☒

DAGS Job No. 12-20-2597

PROJECT TITLE: **DIAMOND HEAD HEALTH CENTER AIR CONDITIONING SYSTEM IMPROVEMENTS**

**CONTRACT**

Basic Contract Amount \$ 1,572,500.00

**CHANGE ORDERS**

Total \$ 11,834.00

Adjusted Contract Amount \$ 1,584,334.00

**FOR INSPECTION BRANCH USE**

☐ SUBMITTAL REGISTER ☐ COMMENCEMENT REQUIREMENTS

**DUE MONTHLY:**

☐ PROJECT SCHEDULE

☒ DAILY REPORTS

☒ PAYROLL AFFIDAVIT

**MONTHLY ESTIMATE CHECKLIST**

☒ CONTRACT NUMBER

☒ PROJECT NAME AND LOCATION

☒ ALL SIGNATURES

**SPECIALTY / MISC:**

☐ PROJECT ACCEPTANCE

☐ AIR COND & PAINT ACCT DONE

**WORK ACCOMPLISHED**

**Basic Contract**

**Change Order**

**Total**

Completed to Date 93.73% \$ 1,473,973.00

100.00% \$ 11,834.00 \$ 1,485,807.00

Retained **REDUCED** ☐ \$ 125,346.00

\$ 591.00 \$ 125,937.00

Amount Subject to Payment \$ 1,348,627.00

\$ 11,243.00 \$ 1,359,870.00

Payments to Date \$ 1,172,799.00

\$ 1,172,799.00

Payments Now Due \$ 175,828.00

\$ 11,243.00 **\$ 187,071.00**

Payment No. **FINAL** ☐ 10R1

Remarks:

1 Computed and Checked by

3 Recommended

Project Inspector or Engineer

Date

4 Recommended

Area Engineer/Architect

Date

5 Approved

Branch Chief or District Engineer

Date

The Public Works Administrator certifies that change orders have been issued and the work performed.

State Public Works Administrator

Date

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request, and least 80% of our workforce resides in Hawaii.

**PER, INC**

Name of Contractor

By signature / Title:

Yum Vo, Project Manager

Date

### BASIC CONTRACT - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII

**Department of Accounting and General Services**  
**Division of Public Works**

For the Month of: OCTOBER 2013

**CONTRACTOR:** PER, Inc.

**Contract No.: 61503**

**PROJECT TITLE: DIAMOND HEAD HEALTH CENTER AIR CONDITIONING DAPS Job No.: 12-20-2597**

DAGS Job No.: 12-20-2597

CLOSED								
	<u>PRIME CONTRACTOR</u>	<u>TRADE</u>	<u>LICENSE NO.</u>	<u>BASIC CONTRACT AMOUNT</u>	<u>COMPL. TO DATE</u>	<u>% Cmpl</u>	<u>RETN %</u>	<u>CONTRACT AMOUNT RETAINED</u>
	PER, Inc.	General Contractor	ABC-23456	\$1,572,500	\$1,473,973	93.73%	5%	\$22,050

								SUB- CONTRACT AMOUNT RETAINED
	SUBCONTRACTOR	TRADE	LICENSE NO.	BASIC SUB-CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	
	Paul's Electrical	Electrical	ABC-26840	\$143,700	\$129,330	90.00%	10%	\$12,933
	Akira Yamamoto	Painting	C-4970	\$6,960	\$1,000	14.37%	10%	\$100
	Atlas Flooring	Resilient Tile Flooring	C-15046	\$4,430	\$4,430	100.00%	10%	\$443
	PMJ Builders	Acoustical Tile	BC-18764	\$155,000	\$124,000	80.00%	10%	\$12,400
	Oahu Plumbing and Sheet	Sheet Metal, A/C & Vent	C-5325	\$788,000	\$709,200	90.00%	10%	\$70,920
	Titan Industries	Demo, Asbestos, Lead	BC-28868	\$102,876	\$65,000	63.18%	10%	\$6,500
						#DIV/0!	10%	\$0
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						#DIV/0!	10%	\$0
	Total Retained from Subs				\$1,032,960			\$103,296

BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$125,346
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I certify that the above retentions are correct for this request.

PER, Inc.

Checked/Verified by:

Name of Contractor

Initial - Project Inspector or Engineer

**By Signature**

Date \_\_\_\_\_

**NOTE:**

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

### CHANGE ORDER - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII

**Department of Accounting and General Services**  
**Division of Public Works**

For the Month of: OCTOBER 2013

**CONTRACTOR:** PER, Inc.

**Contract No.: 61503**

**PROJECT TITLE: DIAMOND HEAD HEALTH CENTER AIR CONDITIONING**

**DAGS Job No.: 12-20-2597**

CLOSED			LICENSE	CHANGE ORDER	COMPL.	%	RETN	CHANGE
	PRIME CONTRACTOR	TRADE	NO.	AMOUNT	TO DATE	CMPL	%	ORDER
								AMOUNT
	PER, Inc.	General Contractor	ABC-23456	\$11,834	\$11,834	100.00%	5%	RETAINED

[illegible]

CHANGE ORDER CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$591
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I certify that the above retentions are correct for this request.

PER, Inc.

Name of Contractor

Checked/Verified by:

DN

Initial - Project Inspector or Engineer

**By Signature**

NOV 20 2013

Date \_\_\_\_\_

**NOTE:**

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

**STATE OF HAWAII**  
**DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES**  
**DIVISION OF PUBLIC WORKS**  
**Monthly Payment Slip**

**PAYMENT NO.:** 10

**PROJECT TITLE:** DIAMOND HEAD HEALTH CENTER - AIR CONDITIONING SYSTEM IMPROVEMENTS

**BILLING MONTH:** October-13

**DAGS JOB NO.:** 1 2-20-2597

**CONTRACT NO.:** 61503

**CONTRACTOR:** PER, INC

**VENDOR CODE:** 11269700

<b>Original Contract Payment</b>		Suffix: 1, 2, 3		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B09-410M	0	(\$25,789.00)	\$25,789.00
03	B11-410M	\$150,039.00	0	\$150,039.00
<b>Totals:</b>		\$150,039.00	(\$25,789.00)	\$175,828.00
<b>Change Order Payment</b>		Suffix: 4		
<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
04	B11-410M	\$11,834.00	\$591.00	\$11,243.00
<b>Totals:</b>		\$11,834.00	\$591.00	\$11,243.00
<b>Grand Total:</b>		\$161,873.00	(\$25,198.00)	\$187,071.00

Verified By *[Signature]*

DATE 11/27/13

(This Section for Administrative Services Office Use Only)

Vendor Code 11269700

Cost Code 3A1

Voucher No. 12013N04

Verified By *[Signature]*

DEC -5 2013